



Alcohol and Marijuana Control Office

550 W 7<sup>th</sup> Avenue, Suite 1600

Anchorage, AK 99501

[alcohol.licensing@alaska.gov](mailto:alcohol.licensing@alaska.gov)

<https://www.commerce.alaska.gov/web/amco>

Phone: 907.269.0350

## Alaska Alcoholic Beverage Control Board

# Recreational Site Statement Form

- A new, transfer, or renewal application for a Recreational Site License must be accompanied by a written statement that explains how the establishment meets the requirements listed under AS 04.11.210 and be deemed complete by AMCO staff, or your application will be returned.
- You must provide complete responses to all questions or your application will be returned and will not be scheduled for the next ABC board meeting until the application is deemed complete by AMCO staff.
- All questions must be answered on this form. Do not attach other documents, or they will be returned.
- Do not provide documents and/or statements not requested.

### Mandatory Points to be Included

1. Explain what hours your establishment will be serving beer and wine in relation to your event hours.

GAMES TYPICALLY BEGIN AT 7:30PM. ON RARE OCCASIONS, GAMES MAY START AS EARLY AS 5PM OR AS LATE AS 9PM DUE TO WEATHER, TRAVEL, OR FACILITY EMERGENCIES.

2. Are baseball games, car races, hockey games, sled dog racing events, or curling matches regularly held during a season at your establishment? Yes: ☒ No: ☐

If No, what recreational events are regularly held during a season at your establishment that qualify you for this license under AS 04.11.210?

3. Was this license exercised at least once during each of the two preceding calendar years in accordance with AS 04.11.330(d)? Yes: ☒ No: ☐

If the answer is no, you are required to complete an AB-29 (Waiver of Operation Application) for your renewal application to be deemed complete with this office.

The AB-29 form can be found here if needed:

<https://www.commerce.alaska.gov/web/Portals/9/pub/ABC/AlcoholLicenseApplicationForms/WaiverApp.pdf>

4. List the seasons of the events on your premises. (example: Baseball May 1-Sept 15, Dog Sled Races Oct 1- March 15)

HOCKEY - BEGINS AS EARLY AS SEPT 1<sup>ST</sup> AND LASTS AS LATE AS MAY 15<sup>TH</sup>.

**Kenai Peninsula Youth Foundation**

PO Box 2613, Kenai, AK 99611

(907) 398-4357

December 29, 2020

**Recreational Site Statement**

This state is an addendum to a renewal application of the Recreational Site License #5023 for our non-profit organization.

Our establishment meets the requirements listed under AS 04.11.210. Our organization owns the Kenai River Brown Bears, proud members of the North American Hockey League. Approximately 30 events are held each season, beginning as early as September 1<sup>st</sup>, and ending as late as May 15<sup>th</sup>. Our games typically begin at 7:30pm. On rare occasion, games may start as early as 5pm or end as late as 9pm due to weather, travel, or facility emergencies. Games are held at the Soldotna Regional Sports Complex.

Beer and wine are served during each event, which typically lasts about three hours.

Regards,



Nate Kiel  
President  
Kenai Peninsula Youth Foundation

AMCO

JAN - 4 2021

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED

4/19/2021

ABC BOARD

**LIQUOR LICENSE**  
**2021 - 2022**

LICENSE RENEWAL APPLICATION DUE  
DECEMBER 31, 2022 (AS 04.11.270(b))

THIS LICENSE EXPIRES MIDNIGHT  
FEBRUARY 28, 2023 UNLESS DATED BELOW

TYPE OF LICENSE: Recreational Site

LICENSE FEE: \$800.00

1192

CITY / BOROUGH: Soldotna  
Kenai Peninsula Borough

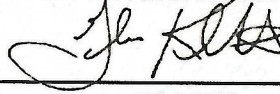
D/B/A: Kenai River Brown Bears  
Soldotna Sports Center 530 A.

Mail Address:  
Kenai Peninsula Youth Foundation, Inc.  
P.O. Box 2613  
Kenai, AK 99611

This license cannot be transferred without permission  
of the Alcoholic Beverage Control Board

[ ] Special restriction - see reverse side

ISSUED BY ORDER OF THE  
ALCOHOLIC BEVERAGE CONTROL BOARD



DIRECTOR

04-900 (REV 9/09)

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED

4/19/2021

ABC BOARD

**LIQUOR LICENSE**  
**2021 - 2022**

LICENSE RENEWAL APPLICATION DUE  
DECEMBER 31, 2022 (AS 04.11.270(b))

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LICENSE FEE: \$800.00

CITY / BOROUGH: Soldotna  
Kenai Peninsula Borough

This license cannot be transferred without permission  
of the Alcoholic Beverage Control Board

[ ] Special restriction - see reverse side

ISSUED BY ORDER OF THE  
ALCOHOLIC BEVERAGE CONTROL BOARD

**COPY**

DIRECTOR

D/B/A: Kenai River Brown Bears  
Soldotna Sports Center 530 Arena Drive  
Mailing Address:  
Kenai Peninsula Youth Foundation, Inc.  
P.O. Box 2613  
Kenai, AK 99611

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES

04-900 (REV 9/09)





Alaska Alcoholic Beverage Control Board

## Master Checklist: Renewal Liquor License Application

Doing Business As:	Kenai River Brown Bears	License Number:	5023
License Type:	Recreational Site		
Examiner:	Kristina S	Transaction #:	100033557

Document	Received	Completed	Notes
AB-17: Renewal Application	1/4	1-4-2021	Postmarked by 12/31
App and License Fees	1/4	1-4-2021	

Supplemental Document	Received	Completed	Notes
Tourism/Rec Site Statement	1/4	1-4-2021	
AB-25: Supplier Cert (WS)			
AB-29: Waiver of Operation			
AB-30: Minimum Operation			
AB-33: Restaurant Affidavit			
COI / COC / 5 Star			
FP Cards & Fees / AB-08a			
Late Fee			

Names on FP Cards:	
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	Yes	No
Selling alcohol in response to written order (package stores)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mailing address and contact information different than in database (if yes, update database)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
In "Good Standing" with CBPL (skip this and next question for sole proprietor)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Officers and stockholders match CBPL and database (if "No", determine if transfer necessary)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

LGB 1 Response: City of Soldotna LGB 2 Response: KPB

☐ Waive ☐ Protest ☐ Lapsed ☐ Waive ☐ Protest ☐ Lapsed



## Alaska Alcoholic Beverage Control Board

**Form AB-17: 2021/2022 License Renewal Application**

- This form and any required supplemental forms must be completed, signed by the licensee, and postmarked no later than 12/31/2020 per AS 04.11.270, 3 AAC 304.160, with all required fees paid in full, or a non-refundable \$500.00 late fee applies.
- Any complete application for renewal or any fees for renewal that have not been postmarked by 02/28/2021 will be expired per AS 04.11.540, 3 AAC 304.160(e).
- All fields of this application must be deemed complete by AMCO staff and must be accompanied by the required fees and all documents required, or the application will be returned without being processed, per AS 04.11.270, 3 AAC 304.105
- Receipt and/or processing of renewal payments by AMCO staff neither indicates nor guarantees in any way that an application will be deemed complete, renewed, or that it will be scheduled for the next ABC Board meeting.

**Establishment Contact Information**

Licensee (Owner):	KENAI PENINSULA YOUTH FOUNDATION, INC	License #:	5023
License Type:	RECREATIONAL SITE		
Doing Business As:	KENAI RIVER BROWN BEARS		
Premises Address:	SOLDOTNA SPORTS CENTER 530 ARENA DRIVE		
Local Governing Body:	CITY OF SOLDOTNA (KENAI PENINSULA BOROUGH)		
Community Council:	NONE		

If your mailing address has changed, write the NEW address below:

Mailing Address:	P.O. Box 2613				
City:	KENAI	State:	AK	ZIP:	99611

**Section 1 – Licensee Contact Information**

**Contact Licensee:** The individual listed below must be listed in Section 2 or 3 as an Official/Owner/Shareholder of your entity and must be listed on CBPL with the same name and title.

This person will be the designated point of contact regarding this license, unless the Optional contact is completed.

Contact Licensee:	NATE KIEL	Contact Phone:	907-398-4359
Contact Email:	NATEKIEL@KRBEBEARS.COM		

**Optional:** If you wish for AMCO staff to communicate with anyone other than the Contact Licensee about your license, list them below:

Name of Contact:		Contact Phone:	
Contact Email:			

Name of Contact:		Contact Phone:	
Contact Email:			

Name of Contact:		Contact Phone:	
Contact Email:			

AMCO





## Form AB-17: 2021/2022 License Renewal Application

## Section 2 – Entity or Community Ownership Information

**Sole Proprietors should skip this Section.**

Use the link from Corporations, Business and Professional Licensing (CBPL) below to assist you in finding the Entity #.

<https://www.commerce.alaska.gov/cbp/main/search/entities>

Alaska CBPL Entity #:	115789
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**READ BEFORE PROCEEDING:** Any new or changes to Shareholders (10% or more), Managers, Corporate Officers, Board of Directors, Partners, Controlling Interest or Ownership of the business license must be reported to the ABC Board within 10 days of the change and must be accompanied by a full set of fingerprints on FBI-approved card stock, AB-08a's, payment of \$48.25 for each new officer with a date-stamped copy of the CBPL change per AS 04.11.045, 50 & 55, or a Notice of Violation will be issued to your establishment and your application will be returned.

The only exception to this is a Corporation who can meet the requirements set forth in AS 04.11.050(c).

**DO NOT LIST OFFICERS OR TITLES THAT ARE NOT REQUIRED FOR YOUR ENTITY TYPE.**

- **Corporations** of any type including non-profit must list ONLY the following:
  - All shareholders who own 10% or more stock in the corporation
  - Each President, Vice-President, Secretary, and Managing Officer regardless of percentage owned
- **Limited Liability Corporations**, of any type must list ONLY the following:
  - All Members with an ownership interest of 10% or more
  - All Managers (of the LLC, not the DBA) regardless of percentage owned
- **Partnerships** of any type, including Limited Partnerships must list ONLY the following:
  - Each Partner with an interest of 10% or more
  - All General Partners regardless of percentage owned

**Important Note:** All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, all required titles, phone number, percentage of shares owned (if applicable) and a full mailing address for each official of your entity whose information we require. If more space is needed: attach additional completed copies of this page. Additional information not on this page will be rejected.

Name of Official:	NATE KIEL				
Title(s):	PRESIDENT	Phone:	907-398-4357	% Owned:	0
Mailing Address:	PO BOX 3444				
City:	KENAI	State:	AK	ZIP:	99611

Name of Official:	DAVID SCHILLING				
Title(s):	VICE-PRESIDENT	Phone:	907-283-3660	% Owned:	0
Mailing Address:	47 SPUR VIEW DRIVE				
City:	KENAI	State:	AK	ZIP:	99611

Name of Official:	JACK JENSEN				
Title(s):	SECRETARY	Phone:	907-252-4748	% Owned:	0
Mailing Address:	PO BOX 1938				
City:	KENAI	State:	AK	ZIP:	99611

AMCO





## Form AB-17: 2021/2022 License Renewal Application

## Section 3 – Sole Proprietor Ownership Information

**Corporations, LLC's and Partnerships of ALL kinds should skip this section.**

**READ BEFORE PROCEEDING:** Any new or changes to the ownership of the business license must be reported to the ABC Board within 10 days of the change and must be accompanied by a full set of fingerprints on FBI approved cardstock, AB-08a's, payment of \$48.25 for each new owner or officer and a date stamped copy of the CBPL change per AS 04.11.045, or a Notice of Violation will be issued to your establishment and your application will be returned.

**Important Note:** All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, phone number, and mailing address for each owner or partner whose information we require.

**If more space is needed, attach additional copies of this page. Additional owners not listed on this page will be rejected.**

This individual is an: ☐ Applicant ☐ Affiliate

Name:				Contact Phone:	
Mailing Address:					
City:		State:		ZIP:	
Email:					

This individual is an: ☐ Applicant ☐ Affiliate

Name:				Contact Phone:	
Mailing Address:					
City:		State:		ZIP:	
Email:					

## Section 4 – License Operation

**Check ONE BOX for EACH CALENDAR YEAR** that best describes how this liquor license was operated:

1. The license was regularly operated continuously throughout each year. (Year-round)

2019 ☐ 2020 ☐

2. The license was only operated during a specific season each year. (Seasonal)

If your operation dates have changed, list them below:

☒ ☒

to

3. The license was only operated to meet the minimum requirement of 240 total hours each calendar year.

A complete AB-30: Proof of Minimum Operation Checklist, and all documentation must be provided with this form.

☐ ☐

4. The license was not operated at all or was not operated for at least the minimum requirement of 240 total hours each year, during one or both calendar years. A complete Form AB-29: Waiver of Operation Application

and corresponding fees must be submitted with this application for each calendar year during which the license was not operated.

☐ ☐

**If you have not met the minimum number of hours of operation in 2020, you are not required to pay the fees, however a complete AB-29 is required with Section 2 marked "OTHER" and COVID is listed as the reason.**

## Section 5 – Violations and Convictions

Have **ANY** Notices of Violation been issued for this license OR has **ANY** person or entity in this application been convicted of a violation of Title 04, 3AAC 304 or a local ordinance adopted under AS 04.21.010 in 2019 or 2020?

Yes ☐ No ☒

**If you checked YES, you MUST attach a list of all Notices of Violation and/or Convictions per AS 04.11.270(a)(2)**

**If you are unsure if you have received any Notices of Violation, contact the office before submitting this form.**

AMCO



# Alaska Alcoholic Beverage Control Board


## Form AB-17: 2021/2022 License Renewal Application

### Section 6 – Certifications

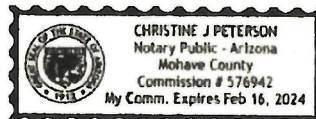
As an applicant for a liquor license renewal, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 304, and that this application, including all accompanying schedules and statements, are true, correct, and complete.

- I agree to provide all information required by the Alcoholic Beverage Control Board or requested by AMCO staff in support of this application and understand that failure to do so by any deadline given to me by AMCO staff will result in this application being returned and potentially expired if I do not comply with statutory or regulatory requirements.
- I certify that all current licensees (as defined in AS 04.11.260) and affiliates have been listed on this application, and that in accordance with AS 04.11.450, no one other than the licensee(s) has a direct or indirect financial interest in the licensed business.
- I certify that this entity is in good standing with Corporations, Business and Professional Licensing (CBPL) and that all entity officials and stakeholders are current and accurately listed, and I have provided AMCO with all required changes of Shareholders (10% or more), Managers, Corporate Officers/Board of Directors, Partners, Controlling Interest or Ownership of the business license, and have provided all required documents for any new or changes in officers.
- **I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of patrons have completed an alcohol server education course approved by the ABC Board and keep current, valid copies of their course completion cards on the licensed premises during all working hours, if applicable for this license type as set forth in AS 04.21.025 and 3 AAC 304.465.**
- I certify that I have not altered the functional floor plan or reduced or expanded the area of the licensed premises, and I have not changed the business name from what is currently approved and on file with the Alcoholic Beverage Control Board.

I certify on behalf of myself or of the organized entity that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.

  
Signature of licensee

Nathan A. Kier  
Printed name of licensee



  
Signature of Notary Public

Notary Public in and for the State of: AZ

My commission expires: 2-16-24

Subscribed and sworn to before me this 30 day of December, 2020.

**Restaurant/Eating Place** applications must include a completed AB-33: Restaurant Receipts Affidavit

**Recreational Site** applications must include a completed Recreational Site Statement

**Tourism** applications must include a completed Tourism Statement

**Wholesale** applications must include a completed AB-25: Supplier Certification

All renewal and supplemental forms are available online

**Any application that is not complete or does not include ALL required completed forms and fees will not be processed and will be returned per AS 04.11.270, 3 AAC 304.105.**

#### FOR OFFICE USE ONLY

License Fee:	\$	Application Fee:	\$ 300.00	Misc. Fee:	\$
Total Fees Due:					\$



Department of Commerce, Community, and Economic Development  
**DIVISION OF CORPORATIONS, BUSINESS &  
PROFESSIONAL LICENSING**

[State of Alaska](#) / [Commerce](#) / [Corporations, Business, and Professional Licensing](#) / [Search & Database Download](#) / [Business License](#) / License #2111288

## LICENSE DETAILS

**License #:** 2111288

[Print Business License](#)

**Business Name:** Kenai Peninsula Youth Foundation

**Status:** Active

**Issue Date:** 08/07/2020

**Expiration Date:** 12/31/2021

**Mailing Address:** PO Box 2613  
Kenai, AK 99611

**Physical Address:** 538 Arena Dr  
Soldotna, AK 99669

## Owners

Kenai Peninsula Youth Foundation

## Activities

Line of Business	NAICS	Professional License #
81 - Services	813410 - CIVIC AND SOCIAL ORGANIZATIONS	

## Endorsements

No Endorsements Found

## License Lapse(s)

If this business license lapsed within the last four years the lapsed periods will appear below. Lapsed periods are the unlicensed period between an expiration date and renewal date.

No Lapses on record for the last 4 years.

Department of Commerce, Community, and Economic Development

CORPORATIONS, BUSINESS & PROFESSIONAL LICENSING

State of Alaska / Commerce / Corporations, Business, and Professional Licensing / Search & Database Download / Corporations / Entity Details

ENTITY DETAILS

Name(s)

Type	Name
Legal Name	Kenai Peninsula Youth Foundation

Entity Type: Nonprofit Corporation

Entity #: 115789

Status: Good Standing

AK Formed Date: 4/28/2008

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 7/2/2022

Entity Mailing Address: PO BOX 2613, KENAI, KENAI, AK 99611

Entity Physical Address: KPYF, 538 ARENA AVE, SOLDOTNA, AK 99669

Registered Agent

Agent Name: Nate Kiel

Registered Mailing Address: PO BOX 2613, KENAI, AK 99611

Registered Physical Address: 402 S FOREST DRIVE, KENAI, AK 99611

Officials

☐ Show Former

AK Entity #	Name	Titles	Owned
	Barry Schoenly	Director	
	David Schilling	Director, Vice President	
	Jack Jensen	Director, Secretary, Treasurer	



AK Entity #	Name	Titles	Owned
	Nate Kiel	Director, President	

## Filed Documents

Date Filed	Type	Filing	Certificate
4/28/2008	Creation Filing	<a href="#">Click to View</a>	<a href="#">Click to View</a>
6/30/2008	Initial Report	<a href="#">Click to View</a>	
7/12/2010	Biennial Report	<a href="#">Click to View</a>	
7/13/2012	Biennial Report	<a href="#">Click to View</a>	
8/13/2012	Amendment	<a href="#">Click to View</a>	<a href="#">Click to View</a>
7/21/2014	Agent Change	<a href="#">Click to View</a>	
12/05/2014	Biennial Report	<a href="#">Click to View</a>	
8/25/2016	Biennial Report	<a href="#">Click to View</a>	
7/02/2018	Biennial Report	<a href="#">Click to View</a>	
7/24/2020	Biennial Report	<a href="#">Click to View</a>	

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